## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

**CLAIMS AS FILED - PART I** 

**June 2017** June 2017

| (Column 1) (Column 1)                                                                 |                                          |                                           |                                      |                      |                              | mn 2)                                | _          | SMALL EI           | YTITY                  | OR     | OTHER THAN OR SMALL ENTITY |                        |
|---------------------------------------------------------------------------------------|------------------------------------------|-------------------------------------------|--------------------------------------|----------------------|------------------------------|--------------------------------------|------------|--------------------|------------------------|--------|----------------------------|------------------------|
| TOTAL CLAIMS                                                                          |                                          |                                           | 17                                   |                      |                              |                                      |            | RATE               | FEE                    | 1      | RATE                       | FEE                    |
| FOR                                                                                   |                                          |                                           | NUMBER FILED                         |                      | NUMBER EXTRA                 |                                      |            | BASIC FEE          | 355.00                 | OR     | BASIC FEE                  |                        |
| TOTAL CHARGEABLE CLAIMS                                                               |                                          |                                           | /7-minus 20=                         |                      | ٠ ٥                          |                                      |            | X\$ 9=             |                        | OR     | X\$18=                     | •                      |
| INDEPENDENT CLAIMS                                                                    |                                          |                                           | 4 minus 3 =                          |                      | /                            |                                      |            | X40=               | 40                     | OR     | X80=                       |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT                                                      |                                          |                                           |                                      |                      |                              |                                      |            | +135=              |                        | OR     | +270=                      |                        |
| * If the difference in column 1 is less than zero, o                                  |                                          |                                           |                                      |                      | r "0" in c                   | olumn 2                              |            | TOTAL              | 395                    | OR     | TOTAL                      | <b>4</b>               |
| CLAIMS AS AMENDED - PART II                                                           |                                          |                                           |                                      |                      |                              |                                      |            | 1                  |                        |        | OTHER                      |                        |
|                                                                                       |                                          | (Column 1)<br>CLAIMS                      | Control Control Control              | (Colu                |                              | (Column 3)                           |            | SMALL              | ENTITY                 | OR     | SMALL                      | ENTITY                 |
| AMENDMENT A                                                                           |                                          | REMAINING<br>AFTER<br>AMENDMENT           |                                      | PREVI                | BER                          | PRESENT<br>EXTRA                     |            | RATE               | ADDI-<br>TIONAL<br>FEE |        | RATE                       | ADDI-<br>TIONAL<br>FEE |
|                                                                                       | Total                                    | · 16.                                     | Minus                                | **                   | 20                           | = X                                  |            | X\$ 9=             |                        | OR     | X\$18=                     | •                      |
|                                                                                       | Independent                              | NTATION OF M                              | Minus                                | ***                  | TCLAIR                       |                                      |            | X40=               |                        | OR     | X80=                       |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                        |                                          |                                           |                                      |                      |                              |                                      |            | +135=              |                        | OR     | +270=                      |                        |
|                                                                                       |                                          |                                           |                                      |                      |                              |                                      |            | TOTAL              |                        | OR     | TOTAL<br>ADDIT. FEE        |                        |
|                                                                                       |                                          | (Column 1)                                |                                      | (Colu                | mn 2)                        | (Column 3)                           | •          | ADDIT. FEE         |                        |        | ADDIT. PEE                 | 10-10-                 |
| AMENDMENT B                                                                           |                                          | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                      | HIGI<br>NUM<br>PREVI | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA                     |            | RATE               | ADDI-<br>TIONAL<br>FEE |        | RATE                       | ADDI-<br>TIONAL<br>FEE |
|                                                                                       | Total                                    | *                                         | Minus                                | **                   |                              | =                                    |            | X\$ 9=             |                        | OR     | X\$18=                     |                        |
|                                                                                       | Independent                              |                                           | Minus                                | ***                  |                              | = -                                  | <b>l</b> l | X40=               |                        | OR     | X80=                       |                        |
| L                                                                                     | HHST PRESE                               | NTATION OF M                              | JUIPLE DEP                           | ENDEN                | CLAIM                        |                                      | <b>1</b>   | +135=              |                        | OR     | +270=                      | ,                      |
|                                                                                       |                                          |                                           |                                      |                      |                              |                                      | L          | TOTAL              |                        | 1      | TOTAL                      |                        |
|                                                                                       |                                          |                                           |                                      |                      |                              |                                      | . ,        | ODIT. FEE          |                        | OR     | ADDIT. FEE                 |                        |
| _                                                                                     |                                          | (Column 1)                                | n nika mendeban ing                  |                      | mn 2)                        | (Column 3)                           | 1 _        |                    |                        |        |                            | ٠,                     |
| AMENDMENT C                                                                           |                                          | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                      | NUM<br>PREVI         | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA                     |            | RATE               | ADDI-<br>TIONAL<br>FEE | -      | RATE                       | ADDI-<br>TIONAL<br>FEE |
| N<br>N                                                                                | Total                                    | •                                         | Minus                                | **                   |                              | 8                                    |            | X\$ 9=             |                        | OR     | X\$18=                     |                        |
| AME                                                                                   | Independent                              | •                                         | Minus                                | ***                  |                              | =                                    | <b>!</b>   | X40=               |                        |        | X80=                       |                        |
| Ľ                                                                                     | FIRST PRESE                              | NTATION OF M                              | ULTIPLE DEF                          | PENDEN               | TCLAIM                       |                                      | J ∤        |                    |                        | OR     |                            |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |                                          |                                           |                                      |                      |                              |                                      |            |                    |                        | OR     | +270≐                      |                        |
| **                                                                                    | if the "Highest Nu<br>If the "Highest Nu | mber Previously Particusty P              | aid For" IN THIS<br>aid For" IN THIS | S SPACE<br>S SPACE   | is less that<br>is less that | n 20, enter "20.<br>In 3, enter "3." |            | TOTAL<br>DDIT. FEE |                        |        | TOTAL<br>ADDIT. FEE        | ,                      |
|                                                                                       | The "Highest Nun                         | nber Previously Pa                        | id For (Total or                     | Independ             | tent) is the                 | nighest numbe                        | ar tou     | nd in the app      | ropriate box           | in col | iumo 1.                    |                        |